

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

TIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT (FOR CANDIDATES)

This Report Covers Calendar Year: 2010

☒ ORIGINAL REPORT

☐ AMENDED REPORT

☐ I currently hold an office that would require me to file a Tier 2.1, or Tier 3 Personal Financial Disclosure Statement. As such, I have completed SCHEDULE L.

Office Sought: District Judge 29th JDC Incumbent: ☐ Yes ☒ No

Date of Election: 3/24/12

Date Qualified: 12/7/11

Name of Filer (print full name): Michele R. Morel

Mailing Address: P.O. Box 1046

City, State, Zip: Luling, LA 70070

Name of Spouse (print full name): Ricky L. Oubre

Spouse's Occupation: Sheriff's Deputy

Spouse's Principal Business Address: 260 Judge Edward Dufresne Parkway

City, State Zip: Luling, LA 70070

Check all that apply:

☒ I have filed my state income tax return for the previous year.

☐ I have filed for an extension of my state income tax return for the previous year.

☒ I have filed my federal income tax return for the previous year.

☐ I have filed for an extension of my federal income tax return for the previous year.

NOTE: La. R.S. 18:1495.7 and 42:1124.2 does not provide candidates the opportunity to request an extension in filing their personal financial disclosure statements.

Certificate of Accuracy

I do hereby certify, after having been duly sworn, that the information contained in this personal financial disclosure statement is true and correct to the best of my knowledge, information, and belief.

[Signature]

Signature of Filer

Sworn to and subscribed before me on this 30th day of December 2011

Harry J. Morel, Jr.

Notary Public (print name)

[Signature]

Notary Public (signature)

Date Commission Expires w/death

HARRY J. MOREL, JR.
ATTORNEY AT LAW/NOTARY PUBLIC
LA STATE BAR #2232
P.O. BOX 1046 • LULING, LA 70070
985-785-1090

Revised June 2011

Form 416B

www.ethics.state.la.us

Jan. 02 2012 05:57PM P2

FAX NO. : 9853081226

FROM: Michele R. Morel Attorney

Fax From StreamCenter

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule A: Employment Information

<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse	<input checked="" type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Job Title: <u>Assistant District Attorney</u>	
Name of Employer: <u>Terrebonne Parish District Attorney's Office</u>	
Address: <u>7856 Main Street, Courthouse Annex Building, Suite 200</u>	
City, State, Zip: <u>Houma, LA 70360</u>	
Job Description: <u>Prosecute cases on behalf of the State of Louisiana</u>	

<input type="checkbox"/> Filer <input checked="" type="checkbox"/> Spouse	<input checked="" type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Job Title: <u>Sheriff's Deputy, Lieutenant</u>	
Name of Employer: <u>St. Charles Parish Sheriff's Office</u>	
Address: <u>240 Judge Edward Dufresne Parkway</u>	
City, State, Zip: <u>Culmville, LA 70070</u>	
Job Description: <u>Enforce and Investigate Warrants for the U.S. Marshall's Fugitive Task Force</u>	

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Job Title: _____	
Name of Employer: _____	
Address: _____	
City, State, Zip: _____	
Job Description: _____	

<input type="checkbox"/> Filer <input type="checkbox"/> Spouse	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
Job Title: _____	
Name of Employer: _____	
Address: _____	
City, State, Zip: _____	
Job Description: _____	

- You are required to disclose employment information related to both you and your spouse.
- List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

SCHEDULE B: POSITIONS - BUSINESS

☒ Filer ☐ Spouse ☐ Both

Amount of Interest (amount exceeds 10%): 50 %

Name of Business: M + W Future Properties, LLC

Address: 116 Lakewood Drive

City, State, Zip: Luling, LA 70070

Business Description: Building owner renting to tenants

Nature of Association: LLC

☒ Filer ☐ Spouse ☐ Both

Amount of Interest (amount exceeds 10%): 100 %

Name of Business: Michele R Morel, Attorney at Law, LLC

Address: 116 Lakewood Drive

City, State, Zip: Luling, LA 70070

Business Description: law practice

Nature of Association: LLC

☐ Filer ☐ Spouse ☐ Both

Amount of Interest (amount exceeds 10%): _____ %

Name of Business: _____

Address: _____

City, State, Zip: _____

Business Description: _____

Nature of Association: _____

☐ Filer ☐ Spouse ☐ Both

Amount of Interest (amount exceeds 10%): _____ %

Name of Business: _____

Address: _____

City, State, Zip: _____

Business Description: _____

Nature of Association: _____

* You are required to complete SCHEDULE B if you or your spouse is a director, officer, owner, partner, member, or trustee of a business AND if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

LOUISIANA BOARD OF ETHICSPost Office Box 4368
Baton Rouge, Louisiana 70821**Schedule C: Positions – Nonprofit**☐ Filer ☐ Spouse

Name of Organization: _____

Address: _____

City, State, Zip: _____

Nature of Association: _____

Description of Organization: _____

N/A

☐ Filer ☐ Spouse

Name of Organization: _____

Address: _____

City, State, Zip: _____

Nature of Association: _____

Description of Organization: _____

☐ Filer ☐ Spouse

Name of Organization: _____

Address: _____

City, State, Zip: _____

Nature of Association: _____

Description of Organization: _____

☐ Filer ☐ Spouse

Name of Organization: _____

Address: _____

City, State, Zip: _____

Nature of Association: _____

Description of Organization: _____

*You are required to complete SCHEDULE C if you or your spouse is a director or officer of a nonprofit agency.

Revised June 2011

Form 416B

www.ethics.state.la.us

Jan. 02 2012 05:58PM PS

FAX NO. : 9853081226

FROM : Michele R. Morel Attorney

Fax From StreamCenter

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule D: Income from the State, Political Subdivisions, and/or Gaming Interests

☒ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)
Type of Income: ☐ State ☒ Political Subdivision ☐ Gaming Interest
Name of Business (if applicable): Terrebonne Parish District Attorney's
Name of Income Source: TPDA, State of LA & Terrebonne Parish Office
Address: 7856 Main Street, Courthouse Annex Bldg, Ste. 202
City, State, Zip: Houma, LA 70360
Amount of Income (exact dollar amount): \$ 48,717.76

☒ Filer ☐ Spouse ☒ Business (where amount of interest exceeds 10%)
Type of Income: ☒ State ☐ Political Subdivision ☐ Gaming Interest
Name of Business (if applicable): State of Louisiana, Office of Risk Management
Name of Income Source: State of LA
Address: P.O. Box 91106
City, State, Zip: Baton Rouge, LA 70821
Amount of Income (exact dollar amount): \$ 1784.50

☐ Filer ☒ Spouse ☐ Business (where amount of interest exceeds 10%)
Type of Income: ☐ State ☒ Political Subdivision ☐ Gaming Interest
Name of Business (if applicable): St. Charles Sheriff's Office
Name of Income Source: St. Charles Sheriff's Office
Address: 260 Judge Edward Dufresne Parkway
City, State, Zip: Luling, LA 70070
Amount of Income (exact dollar amount): \$ 6466.02

☐ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)
Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest
Name of Business (if applicable): _____
Name of Income Source: _____
Address: _____
City, State, Zip: _____
Amount of Income (exact dollar amount): \$ _____

* You are required to complete SCHEDULE D if you or your spouse received income from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.

* "Income" (for a business) means gross income less costs of goods sold, and operating expenses.

* "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

* The definitions for (and examples of) political subdivision, gaming interest, and business are found in the instructions Section of this form.

Revised June 2011

Form 4168

www.ethics.state.la.us

Jan. 02 2012 05:58PM P6

FAX NO.: 9853081226

FROM: Michele R. Morel Attorney

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule F: Income Received From Business Interests

AGGREGATE AMOUNT OF INCOME RECEIVED FROM BUSINESS INTERESTS:

- ☒ Category I (less than \$5,000) ☐ Category II (\$5,000-\$24,999)
☐ Category III (\$25,000-\$100,000) ☐ Category IV (more than \$100,000)

☒ Filer ☐ Spouse

Name of Business: Michele R. Morel, Attorney at Law, L.L.C.

Address: 116 Lakewood Drive

City, State, Zip: Luling, LA 70070

Nature of services rendered or reason income was received: solo law practice

☐ Filer ☐ Spouse

Name of Business: _____

Address: _____

City, State, Zip: _____

Nature of services rendered or reason income was received: _____

☐ Filer ☐ Spouse

Name of Business: _____

Address: _____

City, State, Zip: _____

Nature of services rendered or reason income was received: _____

☐ Filer ☐ Spouse

Name of Business: _____

Address: _____

City, State, Zip: _____

Nature of services rendered or reason income was received: _____

*You are required to complete SCHEDULE F if you or your spouse received income from a business interest.

* "Income" (for a business) means gross income less costs of goods sold, and operating expenses.

* "Income" (for an individual) means taxable income and shall not include any income received pursuant to a life insurance policy.

*Income reported on SCHEDULE D or E does not have to be restated on SCHEDULE F.

Revised June 2011

Form 416B

www.ethics.state.la.us

Jan. 02 2012 05:58PM P7

FAX NO.: 9853081226

FROM: Michele R. Morel Attorney

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

Schedule H: Immovable Property (a property that exceeds \$2,000 in value)

☒ Filer ☐ Spouse ☐ Both

Location of Property

Country: USA State: LA Parish/County: St. Charles

Description of Property: home

Fair Market Value
or Use Value:

☐ Category I (less than \$5,000)

☐ Category II (\$5,000-\$24,999)

☐ Category III (\$25,000-\$100,000)

☒ Category IV (more than \$100,000)

☐ Filer ☐ Spouse ☒ Both

Location of Property

Country: USA State: LA Parish/County: St. Charles

Description of Property: office building

Fair Market Value
or Use Value:

☐ Category I (less than \$5,000)

☐ Category II (\$5,000-\$24,999)

☐ Category III (\$25,000-\$100,000)

☒ Category IV (more than \$100,000)

☐ Filer ☒ Spouse ☐ Both

Location of Property

Country: USA State: LA Parish/County: St. Charles

Description of Property: home

Fair Market Value
or Use Value:

☐ Category I (less than \$5,000)

☐ Category II (\$5,000-\$24,999)

☒ Category III (\$25,000-\$100,000)

☐ Category IV (more than \$100,000)

☐ Filer ☐ Spouse ☒ Both

Location of Property

Country: USA State: LA Parish/County: St. Charles

Description of Property: vacant lots x2

Fair Market Value
or Use Value:

☐ Category I (less than \$5,000)

☐ Category II (\$5,000-\$24,999)

☒ Category III (\$25,000-\$100,000)

☐ Category IV (more than \$100,000)

*You are required to disclose the location by country, state, and parish/county.

* You are required to provide a brief description of the immovable property and its fair market value or use value (determined by the assessor for purposes of ad valorem taxes.)

Revised June 2011

Form 4168

www.ethics.state.la.us

Jan. 02 2012 05:59PM PB

FAX NO.: 9853081226

FROM: Michele R. Morel Attorney

Schedule I: Investment Holdings (an investment holding that exceeds \$5,000)☐ Filer ☐ Spouse ☐ BothName of Security: N/A

Description of Security: _____

☐ Filer ☐ Spouse ☐ Both

Name of Security: _____

Description of Security: _____

☐ Filer ☐ Spouse ☐ Both

Name of Security: _____

Description of Security: _____

☐ Filer ☐ Spouse ☐ Both

Name of Security: _____

Description of Security: _____

* You are required to complete SCHEDULE I if you or your spouse holds investment securities where each investment security has a value that exceeds \$5,000.

* You are not required to disclose variable annuities, variable life insurance, variable universal life insurance, whole life insurance, any other life insurance product, mutual funds, education investment accounts, retirement investment accounts, government bonds, and cash/cash equivalent investments.

* You are not required to disclose information concerning any property held and administered for any person other than you or your spouse under a trust, tutorship, curatorship, or other custodial instrument.

Revised June 2011

Form 416B

www.ethics.state.la.us

Schedule K: Liabilities (a liability that exceeds \$10,000)

☐ Filer ☐ Spouse

Name of Creditor: N/A

Address: _____

City, State, Zip _____

Name of Guarantor (if applicable): _____

☐ Filer ☐ Spouse

Name of Creditor: _____

Address: _____

City, State, Zip _____

Name of Guarantor (if applicable): _____

☐ Filer ☐ Spouse

Name of Creditor: _____

Address: _____

City, State, Zip _____

Name of Guarantor (if applicable): _____

*You are required to complete SCHEDULE K if you or your spouse owes any liability which exceeds \$10,000 on the last day of the reporting period.

*You are not required to disclose any loan secured by movable property, if such loan does not exceed the purchase price of the movable property which secures the loan.

*You are not required to disclose any liability, secured or unsecured, which is guaranteed by you or your spouse for a business in which you or your spouse owns any interest, provided that the liability is in the name of the business and, if the liability is a loan, that you or your spouse does not use proceeds from the loan for personal use unrelated to business.

*You are not required to disclose any loan by a licensed financial institution which loans money in the ordinary course of business.

*You are not required to disclose any liability resulting from a consumer credit transaction as defined in R.S. 9:3516(13).

*You are not required to disclose any loan from an immediate family member, unless such family member is a registered lobbyist, or his principal or employer is a registered lobbyist, or he employs or is a principal of a registered lobbyist, or unless such family member has a contract with the State.

*"Consumer Credit Transaction" means a consumer loan or a consumer credit sale but does not include a motor vehicle credit transaction made pursuant to R.S. 6:969.1 et seq, R.S. 9:3516(13).

Revised June 2011

Form #16B

www.ethics.state.la.us

Jan. 02 2012 05:59PM P10

FAX NO. : 9853081226

FROM : Michele R. Morel Attorney